FEC

SECRETARY OF THE SENATE
16 JAN 29 PM 2: 56

STATEMENT OF **ORGANIZATION**

FORM 1	ORGANI	Office Use Only	
NAME OF COMMITTEE (in full)	☐(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
aggie for NH			
DDRESS (number and stre	et) PO Box 298		
(Check if address is changed)		NH 03301 TATE ZIP CODE	
OMMITTEE'S E-MAIL ADI	DRESS (Please provide only one e-mail ad	ddress)	
Check if address is changed)	info@maggiehassan.com; ad	nin@evanskatz.com	· · · · · · · · · · · · · · · · · · ·
COMMITTEE'S WEB PAGI Check if address is changed)	E ADDRESS (URL) http:/www.maggiehassan.com	m	
2. DATE 01/31	/2016 	 #	
3. FEC IDENTIFICATION	NUMBER C C C00588772	Social Michigan (Michigan Trada), NGRAM Michigan Galder, 1885, Michi	
4. IS THIS STATEMENT	□NEW(N) OR ☑	AMENDED (A)	
certify that I have examine	d this Statement and to the best of my kn	owledge and belief it is true, correct a	and complete.
Type or Print Name of Trea	surer Kathleen N. Sullivan	0 00 -	minusepar of account annual governority.
Signature of Treasurer)zarbte N	Date	1/13/3010
NOTE: Submission of fals	e, erroneous, or incomplete information may subject ANY CHANGE IN INFORMATION SHOULD	at the person signing this Statement to the pe BE REPORTED WITHIN 10 DAYS.	nalties of 2 U.S.C 437g.
Office Use Only	Federa	her information contact: Election Commission e 800-424-9530	FEC FORM 1 (Revised 02/2009)

5.	TYPE OF COMMITTEE					
	Candidate Committee:					
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)					
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Name of Candidate Margaret Wood Hassan					
	Candidate Party Affiliation DEM Sough	State NH ☐ House ✓ Senate ☐ President District				
	(c) This committee supports/opposes only	one candidate, and is NOT an authorized committee.				
	Name of Candidate					
	Party Committee:					
	(d) This committee is a	(National, State or subordinate) committee of the Republican, etc.) Party.				
	Political Action Committee (PAC):					
	(e) This committee is a separate segregated	fund. (Identify connected organization on line 6.) Its connected organization is a:				
	Corporation	Corporation w/o Capital Stock				
	Membership Organization	☐ Trade Association ☐ Cooperative				
	In addition, this committee is	a Lobbyist/Registrant PAC.				
	(f) This committee supports/opposes more committee. (i.e. nonconnected committee	han one Federal candidate, and is NOT a separate segregated fund or party				
	In addition, this committee is a L	obbyist/Registrant PAC.				
	in addition, this committee is a L	eadership PAC. Identify sponsor on line 6.)				
	Joint Fundraising Representative:					
	(g) This committee collects contributions, p committees/organizations, at least one	ays fundraising expenses and disburses net proceeds for two or more political of which is an authorized committee of a federal candidate.				
	☐committees/organizations, none of whice	ays fundraising expenses and disburses net proceeds for two or more political h is an authorized committee of a federal candidate.				
	Committees Participating in Joint Fundrai					
	1.	FEC ID Number C				
	2.	FEC ID Number C				
	3.	FEC ID Number C				
	4.	FEC ID Number C				

Write or	Type (Committee	Name
Maggie	for	NH	

	nnected Organization, Affiliated Committe n Victory Fund	ee, Joint Fundraising Repres	entative, or	Leadership PAC Sponsor
Mailing Address	PO Box 75357			
	Washington	DC	200	013
	CITY	STATE		ZIP CODE
Relationship:				
Connected (Organization Affiliated Committee	✓ Joint Fundraising Repr	resentative	Leadership PAC Sponsor
books and record	ords: Identify by name, address (phone num s. ne Evans	per optional) and position of	the person in	possession of committee
Mailing Address	PO Box 75357			
	Washington	DC	200	013
	CITY	STATE		ZIP CODE
Title or Position		-	00) 540 0	880
Title or Position Custodian of	Records	Telephone Number (2	02) 548-0	
Custodian of				
Custodian of	e name, address (phone number optional) (e.g., assistant treasurer).			
Custodian of Treasurer: List the designated agent	e name, address (phone number optional)			
Custodian of Treasurer: List the designated agent	e name, address (phone number optional) (e.g., assistant treasurer).			
Custodian of Treasurer: List the designated agent Full Name Kat	e name, address (phone number optional) (e.g., assistant treasurer). .hleen N. Sullivan		tee; and the r	
Custodian of Treasurer: List the designated agent Full Name Kat	e name, address (phone number optional) (e.g., assistant treasurer). hleen N. Sullivan PO Box 298	of the treasurer of the committ	tee; and the r	name and address of any
Treasurer: List the designated agent	e name, address (phone number optional) (e.g., assistant treasurer). thleen N. Sullivan PO Box 298 Concord	of the treasurer of the committed of the treasurer of the committed of the	tee; and the r	name and address of any 302 ZIP CODE

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FEC Form 1 (Revised 02/2009)

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Name of Any Co	nnected Organization, Affiliated Committe	ee, Joint Fundraising Representative, o	[ADDITIONAL] r Leadership PAC Sponsor	
Bring Back S	Sense to the Senate 2016			
Mailing Address	120 Maryland Ave NE			
	Washington	DC 200		
Relationship:	CITY	STATE	ZIP CODE	
Connected C	Organization Affiliated Committee	✓ Joint Fundraising Representative	Leadership PAC Sponso	
	onnected Organization, Affiliated Committed	ee, Joint Fundraising Representative, o	[ADDITIONAL] or Leadership PAC Sponsor	
Mailing Address	918 Pennsylvania Ave SE			
	Washington	DC200	2003 ZIP CODE	
Relationship:	CITY	SIAIE	ZIF CODE	

Hand Delivered

NA K, MACCALLUM SUPFRINTEMBENT ART SENATE OFFICE BUILDING MUTE 232 WASHINGTON, OC 70510-711. PHINE [202] 224-0322

United States Senate

OFFICE OF T | E SECRETARY

OFFICE OF PUBLIC RECORDS

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